



## SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

**Garrett for New York**

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 01 / 2026 To: M M / D D / Y Y Y Y 06 / 03 / 2026

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)) ....	957.00	10467.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	957.00	10467.00
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	100.39	17070.61
(b) Total Offsets to Operating Expenditures (from Line 14) .....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	100.39	17070.61
<b>8. Cash on Hand at Close of Reporting Period (from Line 27) .....</b>	<b>6157.62</b>	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>	<b>0.00</b>	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>	<b>0.00</b>	

**For further information, contact the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov).**

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

**Garrett for New York**

Report Covering the Period: From:  /  /  To:  /  /

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	500.00	3600.00
(ii) Unitemized.....	457.00	5367.00
(iii) TOTAL of contributions from individuals ▶	957.00	8967.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	1500.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	957.00	10467.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	957.00	10467.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	100.39	17070.61
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	100.39	17070.61

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	5301.01
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	957.00
25. SUBTOTAL (add Line 23 and Line 24).....	6258.01
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	100.39
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	6157.62

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5 OF 8  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Garrett for New York**

**A.** Full Name (Last, First, Middle Initial)  
GLICKMAN, SETH, , ,

Mailing Address 161 W 75TH ST APT 9D

City NEW YORK State NY Zip Code 10023

FEC ID number of contributing federal political committee. C

Name of Employer BIOME Occupation CTO

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 01 / 2026

Transaction ID : SA11AI.4605

Amount of Each Receipt this Period  
100.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
GLICKMAN, SETH, , ,

Mailing Address 161 W 75TH ST APT 9D

City NEW YORK State NY Zip Code 10023

FEC ID number of contributing federal political committee. C

Name of Employer BIOME Occupation CTO

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 29 / 2026

Transaction ID : SA11AI.4619

Amount of Each Receipt this Period  
100.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
KOPP, ROBERT, , ,

Mailing Address 114 KETAY DRIVE

City EAST NORTHPORT State NY Zip Code 11731

FEC ID number of contributing federal political committee. C

Name of Employer CA TECHNOLOGIES Occupation ADVISOR

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 29 / 2026

Transaction ID : SA11AI.4617

Amount of Each Receipt this Period  
100.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 300.00

**TOTAL** This Period (last page this line number only)..... ▶

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 6 OF 8	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Garrett for New York**

**A.** Full Name (Last, First, Middle Initial)  
KOPP, ROBERT, , ,

Mailing Address 114 KETAY DRIVE

City EAST NORTHPORT	State NY	Zip Code 11731
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FEC ID number of contributing federal political committee. **C**

Name of Employer CA TECHNOLOGIES	Occupation ADVISOR
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Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 28 / 2026

**Transaction ID : SA11AI.4633**

Amount of Each Receipt this Period  
100.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
MOELLER, SARAH, , ,

Mailing Address 471 GRUNDY AVE

City HOLBROOK	State NY	Zip Code 11741
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FEC ID number of contributing federal political committee. **C**

Name of Employer THE BRIGID ALLIANCE	Occupation SR DIRECTOR EXTERNAL RELATIONS
---	--

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 29 / 2026

**Transaction ID : SA11AI.4618**

Amount of Each Receipt this Period  
50.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
MOELLER, SARAH, , ,

Mailing Address 471 GRUNDY AVE

City HOLBROOK	State NY	Zip Code 11741
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FEC ID number of contributing federal political committee. **C**

Name of Employer THE BRIGID ALLIANCE	Occupation SR DIRECTOR EXTERNAL RELATIONS
---	--

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
350.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 28 / 2026

**Transaction ID : SA11AI.4632**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	200.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	500.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 8			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Garrett for New York**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. ACTBLUE</b>		M M / D D / Y Y Y Y 04 / 30 / 2026
Mailing Address PO BOX 441146		FEC Identification Number
City SOMERVILLE	State MA	Zip Code 02144
Purpose of Disbursement ONLINE DONATION PROCESSING FEES		<input type="text" value="C"/>
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input type="text" value="27.36"/>
Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID : SB17.4628</b>
State: _____ District: _____		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. ACTBLUE</b>		M M / D D / Y Y Y Y 05 / 20 / 2026
Mailing Address PO BOX 441146		FEC Identification Number
City SOMERVILLE	State MA	Zip Code 02144
Purpose of Disbursement ONLINE DONATION PROCESSING FEES		<input type="text" value="C"/>
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input type="text" value="3.17"/>
Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID : SB17.4631</b>
State: _____ District: _____		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>C. ACTBLUE</b>		M M / D D / Y Y Y Y 05 / 31 / 2026
Mailing Address PO BOX 441146		FEC Identification Number
City SOMERVILLE	State MA	Zip Code 02144
Purpose of Disbursement ONLINE DONATION PROCESSING FEES		<input type="text" value="C"/>
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input type="text" value="5.93"/>
Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID : SB17.4637</b>
State: _____ District: _____		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	<input type="text" value="36.46"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 8 OF 8	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Garrett for New York**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. ACTBLUE</b>		M M / D D / Y Y Y Y 06 / 03 / 2026
Mailing Address PO BOX 441146		FEC Identification Number
City SOMERVILLE	State MA	Zip Code 02144
Purpose of Disbursement ONLINE DONATION PROCESSING FEES		<input type="text" value="C"/>
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input type="text" value="1.39"/>
Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID : SB17.4638
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B.</b>		M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number
City	State	Zip Code
Purpose of Disbursement		<input type="text" value="C"/>
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input type="text"/>
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>C.</b>		M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number
City	State	Zip Code
Purpose of Disbursement		<input type="text" value="C"/>
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input type="text"/>
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	<input type="text" value="1.39"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value="37.85"/>